

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 0 0 8 3 0 2 9 0 3	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Oil & Solvent Process Company 1704 West First Street, Azusa, Ca 91702				A.State Manifest Document Number 84939727		
4. Generator's Phone (818) 334-5117				B.State Generator's ID C A D 0 0 8 3 0 2 9 0 3		
5. Transporter 1 Company Name Oil & Solvent Process Company		6. US EPA ID Number C A D 0 0 8 3 0 2 9 0 3		C.State Transporter's ID 63582		
7. Transporter 2 Company Name		8. US EPA ID Number		D.Transporter's Phone 818 334-5117		
9. Designated Facility Name and Site Address Omega Chemical 12504 E. Whittier Blvd Whittire, Ca 90602		10. US EPA ID Number C A D 0 4 2 2 4 5 0 0 1		E.State Transporter's ID F.Transporter's Phone G.State Facility's ID C A D 0 4 2 2 4 5 0 0 1 H.Facility's Phone 213 968-0991		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No. Type	13. Total Quantity	14. Unit Wt Vol	15. Waste No.
a. Hazardous Waste Liquid N.O.S. ORM-E NA9189			DM		G	211
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above A-1 - Trichlorotrifluoroethane 98-96% A-2 - Methanol / Ethnols 2-0% A-3 - Oil / Water / Dirt 2-0%				K.Handling Codes for Wastes Listed Above R01		
16. Special Handling Instructions and Additional Information Make Sure drums are not leaking and bungs are tight & also avoid breathing vapors. Use gloves & goggles						
17. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.						
Printed/Typed Name Betsy Peckham				Signature Betsy Peckham		Date 8/17/85
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature		Date
Printed/Typed Name				Signature		Month Day Year 8/17/85
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature		Date
Printed/Typed Name				Signature		Month Day Year 8/17/85
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name David O'Hara				Signature David O'Hara		Date 8/19/85

TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 3000, Sacramento CA 95812